Approved, SCAO OSM CODE: OAG

STATE OF MICHIGAN PROBATE COURT COUNTY

ORDER APPOINTING GUARDIAN OF INCAPACITATED INDIVIDUAL

CIRCUIT COURT - FAMILY DIVISION

In the matter of					, an inca	pacitated individual
Court ORI	Date of birth	Race	Sex	Current address of inca	apacitated individua	I
Date of heari	ng:	Judge:		l		Danas
THE COURT FI	NDS:					Bar no.
is impaired to incapacitated 4. Upon the precontinuing ca 5. The individua 6. There is no is in the be	sentation of clear a mental illne mental def physical illithe extent of lackid individual. sentation of clear are and supervisional is partially capacities, suitable est interest of the area.	_	ne above na onic use of onic intoxica er: or capacity appointment city to care figuardian and	drugs ation to make or commun of a guardian is nec	icate informed c	ans of providing
IT IS ORDERE	D :					
7. Name (type or p	rint)			, whose a	ddress and tele	phone number are:
Address			City	State	Zip	Telephone no.
	ond at \$			all qualify by filing an	acceptance of	appointment.
☐9. This guard	ianship shall term	inate Date		·		
court order		State Police shall immediate ment information network. D :	ely enter the	incapacitated indivi	dual's identifyinç	g information in this
Date			Judge			
Attorney name (type	or print)	Bar no.				
Address		City		State	Zip	Telephone no.

Do not write below this line - For court use only